

Fill in this information to identify the case:

Debtor name **City Line Behavioral Healthcare, LLC**

United States Bankruptcy Court for the: **EASTERN DISTRICT OF PENNSYLVANIA**

Case number (if known) **19-12493(MDC)**

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ 0.00
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ 12,066.21
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ 12,066.21

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 27,054,427.79
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 0.00
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 2,996,978.06
4. Total liabilities Lines 2 + 3a + 3b	\$ 30,051,405.85

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Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts (Identify all)
Name of institution (bank or brokerage firm) Type of account

Last 4 digits of account number

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1. PNC Bank	Operating	5189	\$7,304.15

4. Other cash equivalents (Identify all)

5. Total of Part 1.

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$7,304.15

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments

13. Does the debtor own any investments?

- ☐ No. Go to Part 5.
☒ Yes Fill in the information below.

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Valuation method used
for current value

Current value of
debtor's interest

14. **Mutual funds or publicly traded stocks not included in Part 1**
Name of fund or stock:

15. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**
Name of entity: % of ownership

Life of Purpose-Pennsylvania, LLC
MCI Real Estate Holdings, LLC
15.1. **Life of Purpose, LLC** 100 % Unknown

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**
Describe:

17. **Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

\$0.00

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture Miscellaneous Office Furniture	<u>\$0.00</u>		<u>\$778.05</u>
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software Miscellaneous Office Equipment	<u>\$0.00</u>		<u>\$3,984.01</u>

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$4,762.06

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44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets <u>Tradename</u>	<u>\$767,500.00</u>		<u>Unknown</u>
61.	Internet domain names and websites <u>www.citylinebh.com</u>	<u>\$0.00</u>		<u>Unknown</u>
62.	Licenses, franchises, and royalties			
63.	Customer lists, mailing lists, or other compilations <u>Customer List</u>	<u>\$16,550,200.00</u>		<u>Unknown</u>
64.	Other intangibles, or intellectual property			
65.	Goodwill <u>Goodwill</u>	<u>\$35,954,663.00</u>		<u>Unknown</u>

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?)

- ☒ No
☐ Yes

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68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

☐ No

☒ Yes See Schedule AB 68 attached hereto.

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

☒ No

☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.

☐ Yes Fill in the information below.

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Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$7,304.15</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$4,762.06</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$12,066.21</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$12,066.21</u>

**“SCHEDULE AB 68”
Amortization**

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Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A	Column B
Amount of claim	Value of collateral that supports this claim
Do not deduct the value of collateral.	
\$27,054,427.79	Unknown

2.1 Oxford Finance LLC

Creditor's Name

Attn: Joseph Somerset,
Managing Director
133 North Fairfax Street
Alexandria, VA 22314

Creditor's mailing address

Describe debtor's property that is subject to a lien
Substantially All of the Assets

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$27,054,427.79

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

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Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1 Nonpriority creditor's name and mailing address

4 Erial Road, LLC
12 Penns Trail, Suite 103
Newtown, PA 18940

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.2 Nonpriority creditor's name and mailing address

Fulcrum Equity Partners
5555 Glenridge Connector, Suite 930
Atlanta, GA 30342

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

\$2,825,000.00

3.3 Nonpriority creditor's name and mailing address

Highmark
P.O. Box 890138
Camp Hill, PA 17089-0138

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

\$108,113.36

3.4 Nonpriority creditor's name and mailing address

KLDDiscovery
8201 Greensboro Drive, Suite 300
McLean, VA 22102

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

\$63,864.70

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

Debtor City Line Behavioral Healthcare, LLC Case number (if known) 19-12493(MDC)
Name

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Adam Nachmani, Esquire Sirlin, Lesser & Benson, PC 123 S. Broad Street, Suite 2100 Philadelphia, PA 19109	Line <u>3.1</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	Dana S. Plon, Esquire Sirlin Lesser & Benson, P.C. 123 South Broad Street, Suite 2100 Philadelphia, PA 19109	Line <u>3.1</u> <input type="checkbox"/> Not listed. Explain _____	—
4.3	James E. Gavin, Esquire Masano Bradley 1100 Berkshire Blvd., Suite 201 Wyomissing, PA 19610	Line <u>3.1</u> <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <u>0.00</u>
5b. +	\$ <u>2,996,978.06</u>
5c.	\$ <u>2,996,978.06</u>

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Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☒ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

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United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA

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Official Form 206H
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

	Name	Mailing Address	Name	Check all schedules that apply:
2.1	1146 Stump Road, LLC	1035 Virginia Drive, Suite 130 Fort Washington, PA 19034	Oxford Finance LLC	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.2	155 Pleasant Valley Road LLC	1035 Virginia Drive, Suite 130 Fort Washington, PA 19034	Oxford Finance LLC	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.3	650 Church Road, LLC	1035 Virginia Drive, Suite 130 Fort Washington, PA 19034	Oxford Finance LLC	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.4	Life in Progress LLC	1035 Virginia Drive, Suite 130 Fort Washington, PA 19034	Oxford Finance LLC	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.5	Life of Purpose LLC	1035 Virginia Drive, Suite 130 Fort Washington, PA 19034	Oxford Finance LLC	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Debtor City Line Behavioral Healthcare, LLC

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Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	Life of Purpose-Pennsylvania, LLC	1035 Virginia Drive, Suite 130 Fort Washington, PA 19034	Oxford Finance LLC	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.7	MCI Real Estate Holdings, LLC	1035 Virginia Drive, Suite 130 Fort Washington, PA 19034	Oxford Finance LLC	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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In re City Line Behavioral Healthcare, LLC
Debtor

Case No. 19-12493(MDC)

Chapter 7

DECLARATION UNDER PENALTY OF PERJURY
ON BEHALF OF CORPORATION

I, Drew Rothermel, Sole Member of the Debtor, declare under penalty of perjury that I have read the foregoing Summary of Schedules and Schedules, and any attachments thereto, and that they are true and correct to the best of my knowledge, information and belief.

CITY LINE BEHAVIORAL HEALTHCARE, LLC

By: _____


Drew Rothermel, Sole Member

Dated: May 1, 2019

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United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA

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Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From 1/01/2019 to Filing Date

☒ Operating a business
☐ Other _____

\$0.00

For prior year:
From 1/01/2018 to 12/31/2018

☒ Operating a business
☐ Other _____

\$0.00

For year before that:
From 1/01/2017 to 12/31/2017

☒ Operating a business
☐ Other _____

\$442,213.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor **City Line Behavioral Healthcare, LLC**

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Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. See "SOFA 3" attached hereto		\$112,436.34	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. See "SOFA 4" attached hereto.		\$156,791.50	

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. 4 Erial Road, LLC v. Liberation Way, LLC, et al. 2018-27286	Civil	Montgomery County Court of Common Pleas P.O. Box 311 Norristown, PA 19404-0311	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. Commonwealth of Pennsylvania v. Liberation Behavior Health, LLC MJ-07111-CR-0000104-2019	Criminal	Bucks County Magisteral District Court Bucks County Justice Center 100 North Main Street, 2nd Floor Doylestown, PA 18901	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **City Line Behavioral Healthcare, LLC**

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8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</p>			

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Karalis PC 1900 Spruce Street Philadelphia, PA 19103		April 17, 2019	\$5,960.00
<p>Email or website address www.karalislaw.com</p> <p>Who made the payment, if not debtor? Oxford Finance LLC</p>			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within

Debtor **City Line Behavioral Healthcare, LLC**

Case number (if known) **19-12493(MDC)**

2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address

Dates of occupancy
From-To

14.1. **17 West Knight Avenue
Collingswood, NJ 08108**

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.

☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services
the debtor provides

If debtor provides meals
and housing, number of
patients in debtor's care

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

☒ No.

☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

☒ No. Go to Part 10.

☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and
Address

Last 4 digits of
account number

Type of account or
instrument

Date account was
closed, sold,
moved, or
transferred

Last balance
before closing or
transfer

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this

Debtor **City Line Behavioral Healthcare, LLC**

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case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Debtor **City Line Behavioral Healthcare, LLC**

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Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

Business name address	Describe the nature of the business	Employer identification number Do not include Social Security number or ITIN.
		Dates business existed

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26a.1. Windham Brannon 3630 Peachtree Road NE Atlanta, GA 30326	
26a.2. Marcum LLP 1600 Market Street, 32nd Floor Philadelphia, PA 19103	
26a.3. The Sharp Financial Group 100 Tournament Drive, Suite 250 Horsham, PA 19044	
26a.4. New Phase Advisory Services 315 N. Matlack Street West Chester, PA 19380	

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26b.1. Marcum LLP 1600 Market Street, 32nd Floor Philadelphia, PA 19103	
26b.2. Windham Brannon 3630 Peachtree Road NE Atlanta, GA 30326	
26b.3. New Phase Advisory Services 315 N. Matlack Street West Chester, PA 19380	

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address	If any books of account and records are unavailable, explain why
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Debtor **City Line Behavioral Healthcare, LLC**

Case number (if known) **19-12493(MDC)**

Name and address

If any books of account and records are unavailable, explain why

26c.1. **Windham Brannon
3630 Peachtree Road NE
Atlanta, GA 30326**

26c.2. **Marcum LLP
1600 Market Street, 32nd Floor
Philadelphia, PA 19103**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address

26d.1. **Oxford Finance LLC
Attn: Joseph Somerset, Managing Director
133 North Fairfax Street
Alexandria, VA 22314**

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Andrew Rothermel	1402 Dakota Drive Jupiter, FL 33438	Chief Executive Officer	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☐ No

☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Jason Gerner	633 Rittenhouse Street Philadelphia, PA 19144	Chief Executive Officer	Removed as of May 7, 2018

Name	Address	Position and nature of any interest	Period during which position or interest was held
Branden Coluccio	248 Avenue A Doylestown, PA 18901	Chief Financial Officer	Removed as of May 7, 2018

Debtor **City Line Behavioral Healthcare, LLC**

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Name	Address	Position and nature of any interest	Period during which position or interest was held
Thomas Greer	Fulcrum Equity Partners Glenridge Highlands One 5555 Glenridge Connector, Suite 930 Atlanta, GA 30342	Vice President and Secretary	
Name	Address	Position and nature of any interest	Period during which position or interest was held
Jeff Muir	Fulcrum Equity Partners Glenridge Highlands One 5555 Glenridge Connector, Suite 930 Atlanta, GA 30342	Board Member	
Name	Address	Position and nature of any interest	Period during which position or interest was held
Vinny Olmstead	Vocap Investment Partners 2770 Indian River Blvd., Suite 201 Vero Beach, FL 32960	Board Member	
Name	Address	Position and nature of any interest	Period during which position or interest was held
Tom Leahey	c/o Windham Brannon 3630 Peachtree Road NE Atlanta, GA 30326	Chief Financial Officer	

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	See "SOFA 4" attached hereto			
	Relationship to debtor			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☐ No
☒ Yes. Identify below.

Name of the parent corporation	Employer identification number of the parent corporation
LBH Holdings LLC	EIN: 61-1861326

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund	Employer identification number of the parent corporation
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**“SOFA 3”
90 Day Payments**

Liberation Behavioral Health
Transaction Report
 January - March, 2019

Business Checking (XXXXXX \$189)									
Date	Transaction Type	Num	Adj	Name	Memo/Description	Account	Split	Amount	Balance
01/02/2019	Beginning Balance								120,300.62
01/02/2019	Deposit	No	No	Liberation Way	ONLINE TRANSFER FROM XXXXX324	10100 Business Checking (XXXXXX \$189)	21200 Accounts Payable (AP) - LW	10,000.00	130,300.62
01/02/2019	Expense	No	No	Outford Financial	ACH DEBIT LIBERATION OXFORD FINANT82 DEBITS	10100 Business Checking (XXXXXX \$189)	23000 Accrued Interest Liability	-118,890.91	11,419.71
01/02/2019	Expense	No	No	Outford Financial	ACH DEBIT LIBERATION OXFORD FINANT82 DEBITS	10100 Business Checking (XXXXXX \$189)	60192 Lender Fees	-4,707.60	4,711.91
01/02/2019	Expense	No	No	Public Service PSEG	ACH DEBIT XXXXX5408 PUBLIC SERVICE PSEG	10100 Business Checking (XXXXXX \$189)	60290 Utilities	-233.66	4,478.25
01/02/2019	Expense	No	No	Russell & Alice Palumbo	CHECK 7051 08485545	10100 Business Checking (XXXXXX \$189)	60240 Rent or Lease	-2,605.00	1,872.25
01/10/2019	Expense	No	No	Concast	ACH DEBIT 110892 COMCAST 8492051 XXXXX3832	10100 Business Checking (XXXXXX \$189)	60122 Computer/Software	-359.97	1,512.28
01/11/2019	Expense	No	No	Public Service PSEG	ACH DEBIT XXXXX5408 PUBLIC SERVICE PSEG	10100 Business Checking (XXXXXX \$189)	60290 Utilities	-331.11	1,181.17
01/14/2019	Expense	No	No	Initial QB Online	RECURRING DEBIT CARD XXXXX4014 INTUIT QB ONLINE XXXXX6800 CA	10100 Business Checking (XXXXXX \$189)	60122 Computer/Software	-43.60	1,137.57
01/17/2019	Expense	No	No	PCH Initatus Com	DEBIT CARD PURCHASE XXXXX5904 PCHINITELUS 8778936 XXXXX6132 WA	10100 Business Checking (XXXXXX \$189)	60135 Data & Subscriptions	-29.95	1,088.62
02/01/2019	Expense	No	No	Outford Financial	ACH DEBIT LIBERATION OXFORD FINANT82 DEBITS	10100 Business Checking (XXXXXX \$189)	60192 Lender Fees	-4,306.71	-3,218.09
02/01/2019	Expense	No	No	Outford Financial	ACH DEBIT LIBERATION OXFORD FINANT82 DEBITS	10100 Business Checking (XXXXXX \$189)	23000 Accrued Interest Liability	-120,694.53	-123,912.62
02/04/2019	Deposit	No	No	Outford Financial	REVERSE ACH DEBIT	10100 Business Checking (XXXXXX \$189)	60192 Lender Fees	4,306.71	-119,605.91
02/04/2019	Deposit	No	No	Outford Financial	REVERSE ACH DEBIT	10100 Business Checking (XXXXXX \$189)	23000 Accrued Interest Liability	120,694.53	1,088.62
02/04/2019	Journal Entry	No	No	LW Transfer	LW Transfer	10100 Business Checking (XXXXXX \$189)	-Split-	136,000.00	136,000.62
02/04/2019	Expense	No	No	NSF Fee	RETURNED ITEM FEE (NSF)	10100 Business Checking (XXXXXX \$189)	60111 Bank Charges	-36.00	135,964.62
02/05/2019	Expense	No	No	Outford Financial	ACH DEBIT LIBERATION OXFORD FINANT82 DEBITS	10100 Business Checking (XXXXXX \$189)	60111 Bank Charges	-36.00	135,928.62
02/08/2019	Expense	No	No	Liberation Way	ONLINE TRANSFER TO XXXXX324	10100 Business Checking (XXXXXX \$189)	60192 Lender Fees	-1,506.94	134,421.68
02/11/2019	Expense	No	No	Concast	ACH DEBIT 443784 COMCAST 8492051 XXXXX3832	10100 Business Checking (XXXXXX \$189)	21200 Accounts Payable (AP) - LW	-125,001.00	9,414.74
02/11/2019	Expense	No	No	Russell & Alice Palumbo	CHECK 7053 08486045	10100 Business Checking (XXXXXX \$189)	60122 Computer/Software	-362.34	9,052.40
02/11/2019	Expense	No	No	Russell & Alice Palumbo	CHECK 7054 08486045	10100 Business Checking (XXXXXX \$189)	60240 Rent or Lease	-2,605.00	6,447.40
02/12/2019	Expense	No	No	Public Service PSEG	ACH DEBIT XXXXX5408 PUBLIC SERVICE PSEG	10100 Business Checking (XXXXXX \$189)	60240 Rent or Lease	-287.88	6,159.52
02/12/2019	Expense	No	No	Initial QB Online	RECURRING DEBIT CARD XXXXX4045 INTUIT QB ONLINE XXXXX6800 CA	10100 Business Checking (XXXXXX \$189)	60290 Utilities	-332.81	5,826.71
02/14/2019	Expense	No	No	PCH Initatus Com	DEBIT CARD PURCHASE XXXXX5904 PCHINITELUS 8778936 XXXXX6132 WA	10100 Business Checking (XXXXXX \$189)	60122 Computer/Software	-43.60	5,783.11
02/19/2019	Expense	No	No	PCH Initatus Com	RECURRING DEBIT CARD XXXXX4082 ADOBE ADOBE SUBS XXXXX8158 CA	10100 Business Checking (XXXXXX \$189)	60135 Data & Subscriptions	-29.95	5,753.16
03/04/2019	Expense	No	No	Concast	ACH DEBIT 040506 COMCAST 8492051 XXXXX3832	10100 Business Checking (XXXXXX \$189)	60122 Computer/Software	-216.11	5,537.05
03/11/2019	Expense	No	No	Public Service PSEG	ACH DEBIT XXXXX5408 PUBLIC SERVICE PSEG	10100 Business Checking (XXXXXX \$189)	60192 Computer/Software	-362.34	5,174.71
03/13/2019	Expense	No	No	Initial QB Online	RECURRING DEBIT CARD XXXXX4073 INTUIT QB ONLINE XXXXX6800 CA	10100 Business Checking (XXXXXX \$189)	60290 Utilities	-422.82	4,751.89
03/14/2019	Expense	No	No	Russell & Alice Palumbo	CHECK 7056 08481579	10100 Business Checking (XXXXXX \$189)	60122 Computer/Software	-43.60	4,308.29
03/14/2019	Expense	No	No	Russell & Alice Palumbo	CHECK 7055 08481579	10100 Business Checking (XXXXXX \$189)	60240 Rent or Lease	-182.00	4,126.29
03/18/2019	Expense	No	No	PCH Initatus Com	DEBIT CARD PURCHASE XXXXX5904 PCHINITELUS 8778936 XXXXX6132 WA	10100 Business Checking (XXXXXX \$189)	60240 Rent or Lease	-2,605.00	1,521.29
03/29/2019	Journal Entry	No	No	LW Transfer	LW Transfer	10100 Business Checking (XXXXXX \$189)	60135 Data & Subscriptions	-29.95	1,491.34
							-Split-	6,000.00	7,491.34
								\$ 112,426.34	
								\$ 112,426.34	

Friday, Apr 26, 2019 09:27:24 AM GMT-7 Actual Balan

Total for Business Checking (XXXXXX \$189)
 TOTAL

**“SOFA 4”
Insider Payments**

Liberation Behavioral Health
Transaction Report
January 2018 - March 2019

Business Checking (XXXXXX 5189)							
Date	Transaction Type	Num	Name	Memo/Description	Account	Split	Amount
07/03/2018	Deposit		1146 Slump Road	ONLINE TRANSFER FROM XXXXX8575	10100 Business Checking (XXXXXX 5189)	23150 Intercompany Liabilities	20,000.00
07/03/2018	Deposit		650 Church Road, LLC	ONLINE TRANSFER FROM XXXXX2123	10100 Business Checking (XXXXXX 5189)	23150 Intercompany Liabilities	45,000.00
08/31/2018	Deposit		Fulcrum Growth Fund III GP, LLC	FED WIRE IN 180YH4206DG939X8K	10100 Business Checking (XXXXXX 5189)	25630 Fulcrum Note Payable	300,000.00
07/25/2018	Deposit		Fulcrum Growth Fund III GP, LLC	FED WIRE IN 187P0432DV0X0462	10100 Business Checking (XXXXXX 5189)	25630 Fulcrum Note payable	350,000.00
07/31/2018	Deposit		Liberation Way	ONLINE TRANSFER FROM XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	5,000.00
10/30/2018	Deposit		Liberation Way	ONLINE TRANSFER FROM XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	5,000.00
11/13/2018	Deposit		Liberation Way	ONLINE TRANSFER FROM XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	5,000.00
12/11/2018	Deposit		Liberation Way	ONLINE TRANSFER FROM XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	5,000.00
01/02/2019	Deposit		Liberation Way	ONLINE TRANSFER FROM XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	10,000.00
07/06/2018	Deposit		Liberation Way	ONLINE TRANSFER FROM XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	30,000.00
07/03/2018	Deposit		Liberation Way	ONLINE TRANSFER FROM XXXXX3422	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	50,000.00
07/06/2018	Deposit		Liberation Way	ONLINE TRANSFER FROM XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	100,000.00
12/18/2018	Deposit		Liberation Way	ONLINE TRANSFER FROM XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	230,000.00
04/30/2018	Deposit		Liberation Way	ONLINE TRANSFER FROM XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	237,000.00
05/30/2018	Deposit		Liberation Way	ONLINE TRANSFER FROM XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	244,275.82
03/16/2018	Deposit		Liberation Way	ONLINE TRANSFER FROM XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	250,000.00
08/01/2018	Expense		Liberation Way	ONLINE TRANSFER TO XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	-247,330.92
07/06/2018	Expense		Liberation Way	ONLINE TRANSFER TO XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	-238,000.00
02/08/2019	Expense		Liberation Way	ONLINE TRANSFER TO XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	-125,001.00
07/25/2018	Expense		Liberation Way	ONLINE TRANSFER TO XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	-100,000.00
09/06/2018	Expense		Liberation Way	ONLINE TRANSFER TO XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	-20,000.00
07/25/2018	Expense		Liberation Way	ONLINE TRANSFER TO XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	-15,000.00
08/08/2018	Expense		Liberation Way	ONLINE TRANSFER TO XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	-7,000.00
09/13/2018	Expense		Liberation Way	ONLINE TRANSFER TO XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	-7,000.00
07/25/2018	Expense		Liberation Way	ONLINE TRANSFER TO XXXXX5234	10100 Business Checking (XXXXXX 5189)	21200 Accounts Payable (A/P) - LW	-3,000.00
10/11/2018	Journal Entry		Liberation Way	Transfer from LW's operating account	10100 Business Checking (XXXXXX 5189)	-Split-	5,000.00
03/29/2019	Journal Entry		Liberation Way	LW Transfer	10100 Business Checking (XXXXXX 5189)	-Split-	6,000.00
02/04/2019	Journal Entry		Liberation Way	LW Transfer	10100 Business Checking (XXXXXX 5189)	-Split-	135,000.00
02/04/2019	Deposit		Oxford Financial	REVERSE ACH DEBIT	10100 Business Checking (XXXXXX 5189)	60192 Lender Fees	4,306.71
02/04/2019	Deposit		Oxford Financial	REVERSE ACH DEBIT	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	120,694.53
12/04/2018	Deposit		Oxford Financial	REVERSE ACH DEBIT	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	225,105.89
11/02/2018	Deposit		Oxford Financial	REVERSE ACH DEBIT	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	226,257.44
10/02/2018	Deposit		Oxford Financial	REVERSE ACH DEBIT	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	424,211.79
07/03/2018	Deposit		Oxford Financial	REVERSE ACH DEBIT	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	441,594.34
07/02/2018	Expense		Oxford Financial	ACH DEBIT LIBERATION OXFORD FINANT7882 DEBITS	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	-441,594.34
10/01/2018	Expense		Oxford Financial	ACH DEBIT LIBERATION OXFORD FINANT7882 DEBITS	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	-424,211.79
04/02/2018	Expense		Oxford Financial	ACH DEBIT LIBERATION OXFORD FINANT7882 DEBITS	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	-422,354.35
09/04/2018	Expense		Oxford Financial	ACH DEBIT LIBERATION OXFORD FINANT7882 DEBITS	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	-266,892.65
06/01/2018	Expense		Oxford Financial	ACH DEBIT LIBERATION OXFORD FINANT7882 DEBITS	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	-242,553.60
11/01/2018	Expense		Oxford Financial	ACH DEBIT LIBERATION OXFORD FINANT7882 DEBITS	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	-236,257.44
05/01/2018	Expense		Oxford Financial	ACH DEBIT LIBERATION OXFORD FINANT7882 DEBITS	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	-234,087.31
12/03/2018	Expense		Oxford Financial	ACH DEBIT LIBERATION OXFORD FINANT7882 DEBITS	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	-225,105.89
02/01/2019	Expense		Oxford Financial	ACH DEBIT LIBERATION OXFORD FINANT7882 DEBITS	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	-120,694.53
01/02/2019	Expense		Oxford Financial	ACH DEBIT LIBERATION OXFORD FINANT7882 DEBITS	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	-118,880.91
12/18/2018	Expense		Oxford Financial	ACH DEBIT LIBERATION OXFORD FINANT7882 DEBITS	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	-112,552.95
01/02/2019	Expense		Oxford Financial	ACH DEBIT LIBERATION OXFORD FINANT7882 DEBITS	10100 Business Checking (XXXXXX 5189)	60192 Lender Fees	-6,707.80

05/01/2018	Expense	Oxford Financial	ACH DEBIT LIBERATION OXFORD FINAN/782 DEBITS - Revoluer Fees for Feb - May held by Webster Bank per Oxford	10100 Business Checking (XXXXXX 5189)	60192 Lender Fees	-6,666.67
12/03/2018	Expense	Oxford Financial	ACH DEBIT LIBERATION OXFORD FINAN/782 DEBITS	10100 Business Checking (XXXXXX 5189)	60192 Lender Fees	-4,583.33
02/01/2019	Expense	Oxford Financial	ACH DEBIT LIBERATION OXFORD FINAN/782 DEBITS	10100 Business Checking (XXXXXX 5189)	60192 Lender Fees	-4,306.71
11/01/2018	Expense	Oxford Financial	ACH DEBIT LIBERATION OXFORD FINAN/782 DEBITS	10100 Business Checking (XXXXXX 5189)	60192 Lender Fees	-2,571.11
06/01/2018	Expense	Oxford Financial	ACH DEBIT LIBERATION OXFORD FINAN/782 DEBITS	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	-1,722.22
09/04/2018	Expense	Oxford Financial	ACH DEBIT LIBERATION OXFORD FINAN/782 DEBITS	10100 Business Checking (XXXXXX 5189)	23000 Accrued Interest Liability	-1,722.22
07/02/2018	Expense	Oxford Financial	ACH DEBIT LIBERATION OXFORD FINAN/782 DEBITS	10100 Business Checking (XXXXXX 5189)	60192 Lender Fees	-1,666.67
10/02/2018	Expense	Oxford Financial	ACH DEBIT LIBERATION OXFORD FINAN/782 DEBITS	10100 Business Checking (XXXXXX 5189)	60192 Lender Fees	-1,666.67
02/05/2019	Expense	Oxford Financial	ACH DEBIT LIBERATION OXFORD FINAN/782 DEBITS	10100 Business Checking (XXXXXX 5189)	60192 Lender Fees	-1,506.94

In re City Line Behavioral Healthcare, LLC
Debtor

Case No. 19-12493(MDC)

Chapter 7

DECLARATION UNDER PENALTY OF PERJURY
ON BEHALF OF CORPORATION

I, Drew Rothermel, Sole Member of the Debtor, declare under penalty of perjury that I have read the foregoing Statement of Financial Affairs, and any attachments thereto, and that they are true and correct to the best of my knowledge, information and belief.

CITY LINE BEHAVIORAL HEALTHCARE, LLC

By: 
Drew Rothermel, Sole Member

Dated: May 1, 2019

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

<hr/>	:	CHAPTER 7
	:	
CITY LINE BEHAVIORAL HEALTHCARE, LLC	:	Bankruptcy No. 19-124293(MDC)
	:	
Debtor	:	
<hr/>	:	

**RULE 2016(b) STATEMENT
OF ATTORNEY COMPENSATION**

Pursuant to 11 U.S.C. §329 and Rule of Bankruptcy Procedure 2016(b), the undersigned attorneys for City Line Behavioral Healthcare, LLC (the “Debtor”) in this case makes this statement setting forth the compensation paid to the undersigned for services rendered or to be rendered in contemplation of and in connection with the case by the undersigned, and the source of such compensation.

1. The firm of Karalis PC (“KPC”) has agreed to act as counsel on behalf of the Debtor and acknowledges the receipt of a retainer fee in the amount of \$5,960.00 including the filing fee of \$335.00. The retainer was paid on April 17, 2019 and funded by Oxford Finance LLC at the request of the Debtor.

2. KPC received no other payments from the Debtor within one year prior to the Petition Date.

3. KPC agreed to provide the Debtor with services including consultation concerning the filing of the bankruptcy case under Chapter 7 of the Bankruptcy Code, preparation of all pleadings necessary to commence the case, preparation of schedules, and attendance at the §341 meeting of creditors.

4. KPC did not agree to represent the Debtor in any other matters which may arise in the case, including, but not limited to, examinations of any officer, director, member, employee, or other person of the Debtor under Bankruptcy Rule 2004.

5. The undersigned has not shared or agreed to share any portion of such compensation with any other person who is not a member or regular associate of the undersigned's law firm.

KARALIS PC

By: /s/ Aris J. Karalis
ARIS J. KARALIS
Attorneys for the Debtor

Dated: May 1, 2019